

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**Applicant(s):** Lavian**Application No.:** 09/753017**Filed:** 12/29/2000**Title:** Programmable Command-Line Interface for
Managing Operation of a Network Device**Attorney Docket No.:** 120-471**Nortel:** BA0366CIPCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**Group Art Unit:** 2152**Examiner:** Casiano**RECEIVED
CENTRAL FAX CENTER****JAN 18 2005****RESPONSE AFTER FINAL****Dear Sir:**

In response to the Final Office Action of November 16, 2004, please amend this
application as follows:

Serial No.: 09/753017
Attorney Docket No: 120-471


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Transmittal x 2	2 pages
Amendment AF	9 pages
Revocation and new POA	1 page
Statement Under 37 CFR 3.73(b)	1 page
Total including this sheet	14 <u>pages</u>

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/753017
	Filing Date	12/29/2000
	First Named Inventor	Lavian
	Group Art Unit	2152
	Examiner Name	Casiano
Total Number of Pages in This Submission	Attorney Docket Number	120-471 10360
	Nortel Ref.	BA0366CIP

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) and letter <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Revocation of POA and Appointment of New POA Statement under 37 CFR 3.73(b)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Holmes W. Anderson, Reg. No. 37,272 Steubing McGuinness & Manaras LLP
Signature	
Date	January 18, 2005

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